

07/20/01
JC893 U.S. PTO

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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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07/20/01

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 80398.P449
(maximum 12 characters)

First Named Inventor Annie Wang

Title: BEHAVIOR PROFILE SYSTEM AND METHOD

Express Mail Label No. EL 672 747 757 US

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant Claims Small Entity Status. (37 CFR 1.27)
3. Specification (Total Pages 27)
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table,
or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawings(s) (35 USC 113) (Total Sheets 8)
5. Oath or Declaration (Total Pages 5)
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2)
and 1.33(b).
 - c. Unsigned.
6. Application Data Sheet. (37 CFR 1.76)
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. **Assignment Papers (cover sheet & documents(s))**
10. _____ a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
- _____ b. Power of Attorney
11. _____ English Translation Document (if applicable)
12. _____ a. Information Disclosure Statement (IDS)/PTO-1449
- _____ b. Copies of IDS Citations
13. _____ **Preliminary Amendment**
14. **Return Receipt Postcard (MPEP 503) (Should be specifically itemized)**
15. _____ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. _____ **Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.**
17. _____ Other: _____

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP)
Of Prior Application No.: _____ Examiner _____ Group Art Unit _____
(which is a continuation/ divisional/ CIP of prior application no. _____,
which is a continuation/ divisional/ CIP of prior application no. _____) (List entire chain of priority)

Applicant(s): Also include a Preliminary Amendment to amend the specification to claim priority.

For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____ (or a copy of which is attached).

19. Correspondence Address

Customer Number or Bar Code Label _____
or _____ (Insert Customer No. or Attach Bar Code Label here)
 Correspondence Address Below

NAME _____

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard

Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Name (PRINT/TYPE): Maria McCormack Sobrino Registration No.: 31,639

Signature: Maria McCormack Sobrino Date: July 20, 2001

FEE TRANSMITTAL FOR FY 2001**TOTAL AMOUNT OF PAYMENT (\$)** \$2,846.00**Complete if Known:**

Application No. Not yet assigned
 Filing Date 7/20/01
 First Named Inventor Annie Wang
 Group Art Unit Not yet assigned
 Examiner Name Not yet assigned
 Attorney Docket No. 80398.P449

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
 Deposit Account Name _____

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed: Check
 Credit Card
 Money Order
 Other

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	Fee
Code	(\$)	Code	(\$)
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
		Utility application filing fee	<u>710</u>
		Design application filing fee	_____
		Plant filing fee	_____
		Reissue filing fee	_____
		Provisional application filing fee	_____

SUBTOTAL (1) \$ 710**2. EXTRA CLAIM FEES**

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>92</u>	<u>- 20** = 72</u>	<u>X 18 = 1,296</u>
Independent Claims	<u>13</u>	<u>- 3** = 10</u>	<u>X 80 = 800</u>
Multiple Dependent			<u>0 = 0</u>

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee Description</u>
Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 2,096

FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
105	130	205	Surcharge - late filing fee or oath
127	50	227	Surcharge - late provisional filing fee or cover sheet
139	130	139	Non-English specification
147	2,520	147	For filing a request for ex parte reexamination
112	920*	112	Requesting publication of SIR prior to Examiner action
113	1,840*	113	Requesting publication of SIR after Examiner action
115	110	215	Extension for reply within first month
116	390	216	Extension for reply within second month
117	890	217	Extension for reply within third month
118	1,390	218	Extension for reply within fourth month
128	1,890	228	Extension for reply within fifth month
119	310	219	Notice of Appeal
120	310	220	Filing a brief in support of an appeal
121	270	221	Request for oral hearing
138	1,510	138	Petition to institute a public use proceeding
140	110	240	Petition to revive – unavoidable
141	1,240	241	Petition to revive - unintentional
142	1,240	242	Utility issue fee (or reissue)
143	440	243	Design issue fee
144	600	244	Plant issue fee
122	130	122	Petitions to the Commissioner
123	50	123	Processing fee under 37 CFR 1.17(q)
126	180	126	Submission of Information Disclosure Stmt
581	40	581	Recording each patent assignment per property (times number of properties)
146	710	246	For filing a submission after final rejection (see 37 CFR 1.129(a))
149	710	249	For each additional invention to be examined (see 37 CFR 1.129(b))
179	710	279	Request for Continued Examination (RCE)
169	900	169	Request for expedited examination of a design application
195	300	195	Publication fee for early, voluntary, or normal publication
196	300	196	Publication fee for republication
194	130	194	Request for voluntary publication or republication
098	130	098	Processing fee under 37 CFR 1.17(i)
091	1,240	091	Acceptance of unintentionally delayed claim for priority

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$ 40

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Maria McCormack Sobrino

Signature: Maria McCormack Sobrino Date: July 20, 2001

Reg. Number: 31,639 Telephone Number: (408) 720 8300

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.